

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>W. J.</i>		1/12/00
I.P.E. CLASSIFIER		6	1-28-00
FORMALITY REVIEW	<i>M. M.</i>	71620	2-4-00
RESPONSE FORMALITY REVIEW	<i>M. M.</i>	71629	3-20-00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 - Allowed I Interference
 (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	1/12/00
2	✓	✓	1/12/00
3	✓	✓	1/12/00
4	✓	✓	1/12/00
5	✓	✓	1/12/00
6	✓	✓	1/12/00
7	✓	✓	1/12/00
8	✓	✓	1/12/00
9	✓	✓	1/12/00
10	✓	✓	1/12/00
11	✓	✓	1/12/00
12	✓	✓	1/12/00
13	✓	✓	1/12/00
14	✓	✓	1/12/00
15	✓	✓	1/12/00
16	✓	✓	1/12/00
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28	✓	✓	1/12/00
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30	✓	✓	1/12/00
31	✓	✓	1/12/00
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42	✓	✓	1/12/00
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45	✓	✓	1/12/00
46	✓	✓	1/12/00
47	✓	✓	1/12/00
48	✓	✓	1/12/00
49	✓	✓	1/12/00
50	✓	✓	1/12/00

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here